Checklist for Evaluation of the Vertebrate Animal Section (VAS)

Performance Site(s):
___ If applicant's location is not where animals will be used, the collaborative performance site should be identified
___ If more than one performance site, include description of animal care and use for each site

Animals to be used:
___ Species
___ Strain
___ Ages
___ Sex
___ Number of animals to be used

Description of Animal Use:
___ Concise, but complete description, including sufficient information for evaluation of procedures

Justification:
___ the use of animals (e.g., instead of cell culture, computer models, etc.)
___ choice of species (e.g., why not a simpler or less evolved vertebrate)
 ___ for non-human primates (NHP) or companion animals (e.g., dogs, cats), thorough justification is required
___ number of animals to be used (cite power calculations if appropriate)

Veterinary care (indicate for each performance site):
___ availability of veterinarian care (proximity and number of veterinarians)
___ frequency of animal monitoring and observation by veterinary and animal care staff
 ___ where does monitoring occur (e.g., home cages, laboratory)
 ___ describe circumstances for how monitoring is conducted (e.g., during animal holding vs. during behavioral or surgical procedures)
___ describe when and how veterinary staff will intervene if necessary

Provisions to minimize distress, discomfort, pain and injury:
___ describe specific measures and circumstances when such provisions will be used
___ identify specifically (i.e., by name) tranquilizers, analgesics, anesthetics and antibiotics to be used; state concisely when they will be used
___ care, monitoring or special housing following surgery or treatments
___ indicators of humane endpoints to minimize pain and distress
___ brief description of restraint devices, if relevant

Euthanasia:
___ method(s) for termination
___ justification for choice of method
___ consistent with recommendations of AVMA Guidelines on Euthanasia

Other VAS-related items
___ Institutional Assurance number (face page of PHS398, or "other project information" page of SF424)
___ status of IACUC approval (e.g., requested, pending, approved)